Total Policy
Premium \$ 54,486.00
(This premium may be subject to adjustment)

Countersigned by

JAN 2 2 1996

Authorized Representative

Named Insured:	•	Po	ncy Number:	S 1352759	
White Oak Inc (See IL7016 0189)	·	Policy F	ffective Date:	10/11/95	
(500 12/010 5105)		Toney El	decuve Date.	10/11/73	
·		Endorsement Effe	ective Date:	08/30/96	
Changes indicated in this endors	sement affect all cove	rages provided under	this		
	COM	MERCIAL POLIC	Y		
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The Common Declarations Page	is amended to reflect	the changes indicate	d below by an	X "	
Amend the Named In	sured to read:			·	·
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Amend the Insured's A	Address to read:	· · · · · · · · · · · · · · · · · · ·			: ·
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Coverage Parts of this	policy are revised as	follows:			
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The Commercial Policy Co	overage Schedule is a	mended to include th	iese changes.		
Other Changes		ı			
Outer Changes			· *		
Boothurst LLC is amended t	to read Boothhurst LLC				
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+ %					
	*				
-Rata Factor:					
nber of Days	Total Endor	sement Premium:	NIL		
		As			
11/11/96 /HV/KB.		4801	·		
Date of Issue	A	gent No.	Authorized R	presentative Signat	ure

Endorsement#

Named Insured:		Police	cy Number: S	1352759
WHITE OAK BUILDER (SEE IL7016 0189)	IS INC	Policy Effe	ective Date:	10/11/95
		Endorsement Effec	ctive Date:	05/23/96
Changes indicated in this en	ndorsement affect all o	coverages provided under t	this	
Changes indicated in this ch		OMMERCIAL POLICY		
The Common Declarations Pa	age is amended to ref	flect the changes indicated	below by an X	n.
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Amend the Insured	d's Address to read:			
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	this policy are revised	•		
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The Commercial Policy	y Coverage Schedule	is amended to include the	se changes.	
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X Other Changes				
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ROUTE 72, INC				
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o-Rata Factor:			2,,,,	
mber of Days	Total E	ndorsement Premium:	NIL	
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06/13/96 /HV/N Date of Issue	<u>MR</u>	4801 Agent No.	Authorized Represe	

Named Insured:		Po	ey Number:	S 1352759
WHITE OAK BUILDERS (SEE IL7016 0189)	INC	Policy Effe	ective Date:	10/11/95
		Endorsement Effec	tive Date:	10/11/95
Changes indicated in this end	orsement affect all cov	erages provided under t	this	
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ro-Rata Factor: umber of Days	Total End	orsement Premium	NIL	
02/28/96 /HV/M	R	4801		
Date of Issue		Agent No.	Authorized Re	presentative Signature
0 10 04 88	BN	<i>L.</i>		A Comment of the Comm

Endorsement#

Named Insured:		Policy Number: S 135:			
WHITE OAK BUILDERS INC (SEE IL7016 0189)		Policy Eff	ective Date:	10/11/95	
		Endorsement Effec	ctive Date:	02/19/96	
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X Other Changes					
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Stone Mill Inc					
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o-Rata Factor:					
umber of Days	Total End	dorsement Premium:	NIL	· <u>·············</u>	
02/28/96 /HV/MR Date of Issue		4801 Agent No.	Authorizad D	presentative Signature	
10°04 88	. •	Q ()	Aumonizeu Kel	oresentative Signature	

14.J	POLICY CHANGES	Endorsement #
Named Insured:	Policy N	Number: S 1352759
WHITE OAK INC	D. 11 755	70.1.1.105
(SEE IL7016 0189)	Policy Effective	ve Date: 10/11/95
	Endorsement Effective	e Date: 11/22/95
Changes indicated in this endorse	ement affect all coverages provided under this	
	COMMERCIAL POLICY	
	s amended to reflect the changes indicated be	
X Amend the Named Insu	ured to read: WHITE OAK BUILDERS IN	C
(SEE IL7016 0189)		
Amend the Insured's Ac	ddress to read:	
·	ration are regional as follows:	
Coverage Parts of this	poncy are revised as renews.	
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02/28/96 /HV/MR

4801

Date of Issue

Agent No:

Enc	dor	sem	en	Į	Ŧ

WHITE OAK INC		,	Number: S	3 1352759
(OFF 11 701 C 0190)		Policy Effect	iva Data:	10/11/95
(SEE IL7016 0189)		rolley Effects	ve Date.	10/11/95
		Endorsement Effective	e Date:	11/02/95
Changes indicated in this endorsen	nent affect all o	coverages provided under this	}	
		OMMERCIAL POLICY		
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Amend the Insured's Add	dress to read:			
Coverage Parts of this po	olicy are revise	d as follows:		
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Delete			 	
The Commercial Policy Cove	rage Schedule	is amended to include these	changes.	
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THE FOLLOWING NAMES A Capano Enterprises Inc Wyndom Inc	ARE ADDED T	O THE LIST OF NAMED IN	SUREDS:	
THE FOLLOWING NAMES A		O THE LIST OF NAMED IN	SUREDS:	
THE FOLLOWING NAMES A Capano Enterprises Inc Wyndom Inc o-Rata Factor: 0.940				

01/23/96 /HV/MR

4801

Date of Issue

Agent No.

Authorized Representative Signature

Case 1:05-cv-00309-KAJ Document 16-6 Filed 11/04/2005 Page 8 of 27

POLICY CHANGES

Endorsement#

Named Insured:		Policy Number:	S 1352759
		Policy Effective Date:	
		Toncy Directive Date.	
		Endorsement Effective Date:	
Coverage Part Affected:			
	Common Declara	ition	
	CHANGES)
The above coverage part is hereby amende	ed as follows:	1	296 / 063
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	Named Insured		
Environmental Resources Inc			
Cranbrook Development Company			
Carriage Run Inc			
The American Group Joseph L Capano Builders Inc			
Newbury Village Inc			
Rt 40 & 7 Venture Inc		•	
Gulls Nest Inc			
Capano Builders Inc			
Canterbury Village L P		•	
Olde Christiana Management Compa	ny Inc		
FJM Limited Partnership			
Cranbrook Realty			
Windover Company Ken Company			
Pro-To-Call Realty Inc			
Christiana Concrete Company Inc			
J O F R Inc			
Tree Lane Associates Inc	· • • •		•
Hawks Nest Inc			
77 Associates Inc			
Buttonwood Enterprises Inc			
Wellington Woods Maintenance Corp			1
Kensington Maintenance Corp			
Valley Road Maintenance Assoc		•	
Lakeside Maintenance Assoc Capano Enterprises Inc		•	
J L Capano Inc	•		
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	POLICY CHA	unges 📋	Endorsement # _	
Named Insured:		Po	licy Number:	S 1352759
		Policy E	ffective Date:	
		Endorsement Eff	ective Date:	
Coverage Part Affected:				,
	Common Declara	tion	• •	
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	CHANGES			
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The above coverage part is hereby am	iended as follows:	•		
	Named Insured			
	tauned implied			
White Oak Builders Inc				
Harmony Crest Inc				
Soya Inc				
Texaco Inc				
Bass Properties Inc				
Golden Acres Inc				
Open Spaces Inc				•
Oak Run Inc				
Christiana Ventures Inc	•			
JYD Inc				
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Clair Manor Inc				
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Black Horse Realty Inc				
9244 Inc				
Capko Custom Homes Inc				
Rutledge Builders Inc				
JNC Inc		•		
Caplem Inc	•			
	urst LLC			
Boothurst LLC DOOThhu	1156 LLC			
Del Investments Inc				
600 Delaware Avenue Inc				
Rivers End Inc				
Smalleys Dam Venture Inc				
Capano Enterprises 3	Inc			
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Wyndom, Inc				

Named Insured: Policy Effective Date:	Case 1:05-cv-00309-KAJ	Document 16-6	Filed 11/	04/2005 Page 1	0 of 27
Common Declaration CHANGES The above coverage part is hereby amended as follows: CHANGES The above coverage part is hereby amended as follows: Named Insured Salem Trace Inc J L Capano Realtor Grady Inc Christiana Excavating Company Inc Genesis Masonry Sand Products Kensington Inc St. Georgias Trust St. Georgias Reven Glen Inc Wellington Trust Springfield Maintenance Assoc Rutedge Maintenance Assoc Clair Manor Maintenance Assoc Clair Manor Maintenance Assoc Bear Crossing Ltd Route 13 Associates Inc Cromwell Properties Inc Cotswold Builders Inc Richards Lane Inc Wellington Group Inc Industry 40 Bellwether Manor Inc Rutedge II Associates Inc Fox Run Maintenance Assoc Springfields Ventures Inc Bear Trat LLC Glasgow Farns LLC Route 7 & Joint LLC Shore 17 11 LTC		POLICY CH	LANGES	adorsement #	
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Route 7 & Joint LLC Stone Mill Inc					
Stone Mill Inc					
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	Route 72 The	•			

Date of Issue

Agent No.

Authorized Representative Signature

IL 70 16 01 89

Document 16-6 Filed 11/04/2005 POLICY CHANGES End Case 1:05-cv-00309-KAJ Page 11 of 27 Endorsement# Named Insured: S 1352759 Folicy Number: White Oak Inc (See IL7016 0189) Policy Effective Date: 10/11/95 Endorsement Effective Date: 08/30/96 Coverage Part Affected: COMMERCIAL GENERAL LIABILITY **CHANGES** The above coverage part is hereby amended as follows: ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS, CG2010 1093, IS ADDED PER THE ATTACHED

11/11/96 /HV/KB

Date of Issue

4801

TOTAL ENDORSEMENT PREMIUM:

Agent No.

Authorized Representative Signature

NIL

POLICY NUMBER: S 1352759

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

NEW CASTLE COUNTY DEPARTMENT OF PUBLIC WORKS ROOM 130 2701 CAPITOL TRAIL NEWARK, DE 19711

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.

Named Insured:						P	olicy Nu	mber:	S 1352	759
WHITE OAK E SEE IL7016 018						Policy I	Effective	Date:_	10/11	/95
					Enc	dorsement Ef	fective I	Date:	05/23	1/96
Coverage Part Affects	ed									
		COMMI	ERCL	AL GENE	RAL	LIABILIT	Y			
<u></u>			. (CHANGES	S	· · · · · · · · · · · · · · · · · · ·		10%	Z COM	NDARD MISSION EPTION
The above coverage p	art is hereby amen	ded as foll	ows:				:		•	
NOT-FOR-PRO LOC 32A: 2160	DINGS - NOT FA FIT (T-001) NEW CASTLE A NEW CASTLE (VENUE					(3	34)	(336)	
ADD:	68606	31,035	(A)	10.046		INCL RATA		312 120	INCLUI INCLUI	DED
				•						
										,
										.*
•										
	•									
					• .	•				
		*		Pro Rata F	actor:	(334) (336) 0.386	1	120	A.P.	
				Number D		141 Additional	Premiur	n:	\$120	

06/13/96 /HV/MR Date of Issue

JUN 1 3 1996

4801 Agent No.

		POLICY CH	ANGES	;	Endor	semeni #	
Named Insured:		·			olicy	Number:	S 1352759
WHITE OAK B	UILDERS INC						
(SEE 1L7016 01	89)			Poli	cy Effect	ive Date:	10/11/95
•			I	Endorsemen	t Effectiv	ve Date:	03/23/96
Coverage Part Affecte	ed						
	C	OMMERCIAL G	GENERA	L LIABI	LITY		
			NGES			/o°/ ₆	STANDA COMMISS EXCEPTI
The above coverage p	art is hereby amende	d as follows:				10 10	EXCEPTI
(T-001) LOC 31A: STRI	DEVELOPMENT I PER RUN, WATER KENT COUNTY, M	MAN ESTATES				(334)	(336)
ADD:	47051	10 (T) 2	21.333 PI	INCL RO RATA		213 118	INCLUDED INCLUDED
							1
							•
•							*
					4		
		•					
# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*						
		•					
		**************************************	,				
	•	,		(334)		118 A	A.P.
			Rata Fact			118	A.P.

06/13/96 /HV/MR Date of Issue

4801

Agent No.

JUN 1 3 1996

Authorized Representative Signature
- M. P.

Additional Premium:

HL 70k16 01 89

Named Insured:				Polic	y Number:	S 1352759
WHITE OF (SEE IL701	AK BUILDERS INC 16 0189)			Policy Effe	ctive Date:	10/11/95
			I	Endorsement Effect	ive Date:	01/25/96
Coverage Part Ai	ffected					
	CC)MMERCI/	AL GENERA	L LIABILITY		STANDARD
			CHANGES		10%	STANDARD COMMISSION EXCEPTION
The above covera	age part is hereby amended	as follows:				
LOC 30A: I	OMES (T-001) LOT 13, BELLWETHER I W CASTLE COUNTY, D					
ADD:	46362	1 (U)	95.659 PR	INCL O RATA		(336) INCLUDED INCLUDED
· ·						
				•		
·					,	
						•
			:			
			•			
					.A	
			Pro Rata Facto		68 A.	P.
			Number Days:	257 Additional Pre	mium:	\$68

02/29/96 /HV/MR Date of Issue 4801 Agent No.

P	OI	JCY	CH	AN	GES
	\sim	\sim 1	~11		

					_	
Named Insured:				I	Policy Number:	S 1352759
WHITE OAK BUI	ILDERS INC					
(SEE IL7016 0189))		}	Policy	Effective Date:	10/11/95
			Enc	lorsement E	ffective Date:	12/01/95
Coverage Part Affected		· · · · · · · · · · · · · · · · · · ·			<u></u>	
Coverage Part Affected						
		COMMERCIA	AL GENERAL	LIABILI	ΓY:	
			·	·		STANDARD
		C	HANGES		10%	COMMISSIO EXCEPTION
•			IMIGES		70.	
The above coverage part	t is hereby ame	nded as follows:				
					•	•
MODEL HOMES	IM CIDCITY	IMECTONE				
LOC 25A: 104 SHI WILMINGTON, N	IM CIKCLE, I IEW CASTLE	LIMIESTUME, COUNTY. DE				
11 12211111101011, 11	,_,, CIUILLE					
					(334)	(336)
DELETE:	46362	1 (U)	95.659	INCL RATA	96 · 83	INCLUDED INCLUDED
			PRO	KAIA	63	INCLUDED
•						
MODEL HOMES LOC 29A: LOT 14						
	, BELLWETH					
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE	05 650	INCI	06	INCLUDED
LOC 29A: LOT 14,	, BELLWETH		95.659 PRO	INCL RATA	96 83	INCLUDED INCLUDED
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE				
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE		RATA		
LOC 29A: LOT 14, BEAR, NEW CAST	, BELLWETH TLE COUNTY	, DE	PRO Pro Rata Factor: Number Days:	RATA	83	

02/29/96 /HV/MR Date of Issue

4801 Agent No.

Authorized Representative Signature

IL 70 16 01 89



Case 1:05-cv-00309-KAJ Document 16-6 Filed 11/04/2005 Page 17 of 27 POLICY CHANGES Endorsement #

WHITE OAK				_	Policy Number:	S 1352759
WHILE OAK	BUILDERS INC					
(SEE IL7016	0189).			Policy	Effective Date:	10/11/95
				Endorsement E	ffective Date:	11/30/95
						
Coverage Part Affect	cted					•
		COMMERCI	AL GENEF	RAL LIABILI	1Y /0%	STANDA COMMISS EXCEPT
			CHANGES			LAUCE
The above coverage	part is hereby ame	ended as follows:				
	ES - PRIVATE - C	THER THAN				
	OFIT AILROAD AVEN E COUNTY, DE	IUE, BEAR,	• .			· .
NEW CASTEL	E COOM 1, DE				(334)	(336)
DELETE:	68706	1,500 (A)	21.334	INCL	32	INCLUDED
				PRO RATA	28	INCLUDED
						•
•						
the state of the s	S - PRIVATE - O	THER THAN				
NOT-FOR-PRO	OFIT (T-001)					
NOT-FOR-PRO LOC 28A: 402	and the second s	., INDUSTRY 40,			· .	
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE		INCI	21	INCLUDED
NOT-FOR-PRO LOC 28A: 402	OFIT (T-001) CONNER BLVD.	., INDUSTRY 40,	21.334	INCL PRO RATA	21 18	INCLUDED INCLUDED
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334			
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334	(334)		
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334 I	(334) (336)	18	INCLUDED
NOT-FOR-PRO LOC 28A: 402 PULASKI, BEA	OFIT (T-001) CONNER BLVD AR, NEW CASTL	, INDUSTRY 40, E COUNTY, DE	21.334	(334) (336) ctor: 0.863	18	INCLUDED

02/29/96 /HV/MR Date of Issue

4801 Agent No.



		POLIC	Ý CHAN	GES	্য	Endorsement #	3
Named Insured:	·	<u></u>			P	olicy Number:	S 1352759
WHITE OAK BU (SEE IL7016 018					Policy I	Effective Date:	10/11/95
(SEE LEVOIO DIE	<i>30)</i>						
	.	·		Ene	dorsement Ef	fective Date:	11/22/95
Coverage Part Affected	đ						
		COMMERC	IAL GEN	ERAL	LIABILIT	Y /02	STANDARI COMMISSIC EXCEPTION
		•	CHANGI	ES		• •	
The above coverage par	rt is hereby ame						
MODEL HOMES LOC 27A: LOT 1 MIDDLETOWN,	140, LEA EAR	A FARMS					
ADD:	46362	1 (U)	95.65		INCL RATA	(334) 96 85	(336) INCLUDED INCLUDED
						·	
		*					
	•		Pro Rata			85	A.P.
			Number	Days:	323 Additional	Premium:	\$85

02/28/96 /HV/MR Date of Issue

4801 Agent No.

Authorized Representative Signature (

IL 70 16 01 89



Named Insured:					<i>``I</i> _	ndorsement#	2
		. ·			Po	licy Number:	S 1352759
WHITE OAK B		3			nattaa r	Continu Dates	10/11/05
(SEE IL7016 01	89)				Policy E	ffective Date:	10/11/95
				En	dorsement Eff	ective Date:	10/11/95
Coverage Part Affecte	ed					102	STANDAR COMMISSIO EXCEPTIO
		CON	AMERCI.	AL GENERAL	LIABILIT	Y ; '	
			(CHANGES			
The above coverage pa	art is hereby an	nended a	s follows:				
MODEL HOME							
LOC 9A: WELL BEAR, NEW CA			FF ROUTE	40,			
DELETE:	46362		1 (U)	95.659	INCL	(334) 96	(336) INCLUDED
*** **			· ·				
MODEL HOMES LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN	ve, WIL	MINGTON	,			
LOC 23A: 102 R	ICHARD LAN	NE, WILI	MINGTON	95.659	INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	NE, WILI			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	NE, WILI			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	NE, WILI			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	ne, Wili			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	ne, Wili			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	ve, Wili			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	ne, Wili			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	NE, WIL			INCL	96	INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	ve, Will			INCL (334)		INCLUDED
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	ne, Will		95.659	(334) (336)		
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	NE, WIL		95.659 Pro Rata Factor:	(334) (336) 1.000		
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE	NE, WILI		95.659	(334) (336) 1.000 365		
LOC 23A: 102 RI NEW CASTLE C DELETE:	ICHARD LAN COUNTY, DE 46362	NE, WIL	1 (U)	95.659 Pro Rata Factor:	(334) (336) 1.000 365	192	R.P.
LOC 23A: 102 RI NEW CASTLE C	ICHARD LAN COUNTY, DE 46362	NE, WIL		95.659 Pro Rata Factor: Number Days:	(334) (336) 1.000 365 Return	192 Premium:	R.P.

•		POLICY CI	HANGES	Endo	rsement #	1
Named Insured:			T	Policy N	Number:	S 1352759
WHITE OAK B	UILDERS INC		1	Policy Effective	ve Date:	10/11/95
				nent Effective		10/11/95
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Liteoret			
overage Part Affected:						
	COMMER	CIAL GENER	AL LIABILI	ΓY	* .	
		CHANGE	c			
erri 1		2	i.J	•		
The above coverage pa	of LOCATION 11		ro aran on	EULT UMAN		
SUMMIT BRI	DGE ROAD, CENT	RAL, MIDDLETO	OWN, NEW CA	ASTLE COU	NTY, DE	
\$ 1.			•	•		
					v.	
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	e .					
45.5					•	

02/28/96 /HV/MR Date of Issue

TOTAL ENDORSEMENT PREMIUM:

4801 Agent No.

Authorized Representative Signature

NIL

IL 70 16 01 89

Selective Snf.60	The to Dagunne	nt 16-6		/04/2005 cy / mber		
0 4 40	Replaces Pol.		Poli	cy Effect	ive Date:	10-11-95
Snf.60	\$ 3208281			rage Effe s Policy Effect		:e: s otherwise shown.)
Named Insu	red is:	[]I	ndividu	al [X]	Corporat	ion
		[] P	artners	hip []	Joint Ve	enture
		[]0	ther			
Business of Name	ed Insured:	Carpe	ntry Co	ntractor	10%	STANDARD COMMISSION EXCEPTION
Insurance is provided only for	those coverages for	r which a s	pecific limi	t is shown in t	the following c	overage schequite.
	Co	verage	Schedu.	le		
Covera	age	*.			Limits	
General Aggregate I Products-Completed		than	\$2,00	00,000.		
Products-Completed Aggregate Limit	Operations		\$2,00	00,000.		
Personal and Advert Injury Limit	ising		\$1,00	00,000.		
Each Occurrence Lin	nit		\$1,00	0,000.		
Fire Damage Limit			\$ 5	50,000. AI	NY ONE FI	RE
Medical Expense Lim	nit		\$	5,000. A	NY ONE PE	RSON
	· .					
ÍL0017 1185 ∨	ents: Form 943(3/6/CG7032 0490 CG2503 1185		イL0021 - ĆG0001 - ĆG2504	1188		10 1185 47 0989
			· ·	Premium (This premium	•	979.00 t to adjustment.)

Case 1:05-cv-00309-KAJ Page 22 of 27 Document 16-6 Filed 11/04/2005 This schedule lists classifications, exposures, rates and premiums for those coverage **NSURANCE** parts indicated below: I | Products/Completed Operations [X] Commercial General Liability [] Owners and Contractors Protective Liability [] Liquor Liability ADVANCE PREMIUM RATES PREMISES -PREMISES -PRODUCTS -CLASS PREMIUM PRODUCTS -OPERATIONS CODE BASIS **OPERATIONS** COMPLETED COMPLETED CLASSIFICATION **OPERATIONS OPERATIONS** a) per 1000 square feet a) Area c) Total Cost c) per \$1000 of Cost p) per \$1000 of Payrol1 p) Payroll s) Gross Sales s) per \$1000 of Sales u) Units u) per Unit 5,466.00 CARPENTRY - CONSTRUCTION OF 91340# 600,000.00 (p) 9,110 2.824 1,694.00 RESIDENTIAL PROPERTY NOT **EXCEEDING THREE STORIES IN** HEIGHT Loc 1A: 1 S Old Baltimore Pike, Nevark, Nev Castle County, DE CONTRACTORS - SUBCONTRACTED 91583 3,500,000.00 (c) 0.243 0.516 851.00 1,806.00 WORK - IN CONNECTION WITH BUILDING CONSTRUCTION. RECONSTRUCTION, REPAIR OR ERECTION - ONE OR TWO FAMILY DNELLINGS Loc 1B: See Loc 1A WAREHOUSES - PRIVATE - OTHER 68706 INCL. INCL. 1,500.00 (a) 21.334 32.00 THAN NOT-FOR-PROFIT Loc 2A: 60 Railroad Avenue Bear, New Castle Co. DE Cont 312.00 Minimum Premium \$ 208.00 / \$ Total Advance Premium \$ Cont Location Of All Premises You Own, Rent or Control: (Enter Same if same as Address) See Above Schedule Your Interest In These Premises: [X] Owner [] General Lessee [] Tenant Part You Occupy: Portion This Schedule lists all your premises, operations and other exposures, as they

exist as of the Coverage Effective Date.

Case 1:05-cv-00309-k		ocument 16-6	Filed 11/04	/2005 Pag	e 23 of 27		
Selective	7 · · · 3.	chedule lists classi indicated below:	fications, expo	SUFFER FREEL	• .		
Sciente		mercial General Lia	, bilitv	1 Prod	ucts/Completed 0	Derations	
		ers and Contractors					
·				1.1			
		<u> </u>	. · ·	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
				ATES	- ADVANCE PREMIUM		
	CLASS	PREMIUM	PREMISES -	PRODUCTS -	PREMISES -	PRODUCTS	
CLASSIFICATION	CODE	BASIS	OPERATIONS	COMPLETED OPERATIONS	OPERATIONS	COMPLETED	
CONSTRUCTION		a) Area	a) per 1000 :			OPERATION	
	1	c) Total Cost	c) per \$1000			}.	
		p) Payroll	p) per \$1000	of Payroll	i.	·	
		s) Gross Sales	s) per \$1000	of Sales	:		
·		u) Units	u) per Unit			-	
		t) Acres	t) per Acre				
, 1							
				1		}	
VACANT LAND - OTHER THAN NOT-	49451#	173.00 (t)	3.318	INCL.	574.00	INCL	
FOR-PROFIT			·	1			
				1			
Loc 3A: Summit Bridge Road,				1			
East, Middletovm, New Castle Co. DE							
casere coe or	}			1			
			-			٠	
				{		,	
				Ì			
DWELLINGS - ONE-FAMILY	63010	1.00 (u)	25.889	INCL.	26.00	THE	
(LESSOR'S RISK ONLY)	63010	1.00 (0)	23.609	Incl.	20.00	INCL.	
	}						
Loc 38: See Loc 3A							
]			· {		•	
•	1 1						
]	·		. {		•	
	1						
		•					
VACANT LAND - OTHER THAN NOT-	49451	15.00 (t)	3.318	INCL.	50.00	INCL.	
FOR-PROFIT	[]	·					
Loc 5A: Rt 40 & 7, Wawa, Bear	1					•	
New Castle County, DE					1		
•		·					
				1			
,				1	ĺ		
			1				
Minimum Premium \$ 208.00 /	\$ 312	.00	Tetal Advanc	ce Premium \$	Cont	Cont	
Location Of All Premises You Own.							
See Above Schedule							
							
Your Interest In These Premises:	XI Owner	[] General Lessee	Tenant	[]	·		
Part You Occupy: Portion	This Sci	nedule lists all you	r oremites one	rations and other	er avnocured at	thev	
{		of the Coverage Ef		au roma condi ogne	evhosoics* 03		

CINSURANCE	* /**3	chedule lists classi	fications, expos	uros, rates and	premiums for the	ose coverage	
Seedive	parts indicated below: [X] Commercial General Liability [] Products/Completed Operation						
		mmercial General Liab				perations	
	1 1 0W	ners and Contractors	Protective Liab	illity [] Liqu	or Liability	*	
				l i			
			RA	TES	ADVANCE PREMIUM		
	CLASS	PREMIUM	PREMISES -	PRODUCTS -	PREMISES -	PRODUCTS -	
	CODE	BASIS	OPERATIONS	COMPLETED	OPERATIONS	COMPLETED	
CLASSIFICATION	1 0000) Creations	OPERATIONS		OPERATIONS	
CDOSTITUTION		a) Area	a) per 1000 s		· · · · · · · · · · · · · · · · · · ·	. CICATIONS	
·	1	c) Total Cost	c) per \$1000				
		p) Payroll	p) per \$1000]		
·		s) Gross Sales	s) per \$1000		ļ		
	1	u) Units	u) per Unit				
		t) Acre	t) per Acre				
				;			
			l ·				
BUILDINGS OR PREMISES - BANK	61217	10,068.00 (a)	26.876	INCL.	271.00	INCL.	
OR OFFICE - MERCANTILE OR	1						
MANUFACTURING - MAINTAINED BY	ĺ	'					
THE INSURED (LESSOR'S RISK	1]				
ONLY)- OTHER THAN NOT-FOR-							
PROFIT	1		}				
•			}				
Loc 58: See Loc 5A	1]]				
			{				
			1		•		
REAL ESTATE DEVELOPMENT	47051	3.00 (t)	22.093	INCL.	66.00	INCL.	
PROPERTY		•	;				
				·			
Loc 6A: Old Airport Road &					•		
195, New Castle Co.							
DE .	ì		.				
			·	ļ	•		
						4	
	1					•	
VACANT LAND - OTHER THAN NOT~	49451#	19.00 (t)	3.318	INCL.	63.00	INCL.	
COR DROCKT	1343.1	13.00 (0)	3.3.0	1.102.		••	
FUK-PROFIT - CONTROL C							
Loc 7A: Taylorstowne.				·			
Smalleys Dam Road.	} .			}			
Newark, New Castle Co							
De	}		1				
·	[ì					
	1	Í					
	1	•					
Minimum Premium \$ 208.00 /	\$ 312	2.00	Total Advanc	e Premium \$	Cont	Cont	
Location Of All Premises You Own,	Rent or Co	ontrol: (Enter Same	if same as Addre	ess)			
See Above Schedule							
· · · · · · · · · · · · · · · · · · ·		<u></u>					
Your Interest In These Premises:	[X] Owner	[] General Lessee	[] Tenant	[]			
Part You Occupy: Portion	·						
	1	hedule lists all you		rations and oth	ier exposures, as	they	
	exist a	s of the Coverage Ef	ractive Date.				

Case 1:05-cv-00309-l	KAJ Do	cument 16-6	Filed 11/04	/2005 Pag	je 25 of 27	
Selective .		chedule lists classi indicated below:	fications, expo	sures, rates an	d premiums for tr	lose coverage
Sciective		mmercial General Liab	hility	I l Pro	ducts/Completed 0	perations
		ners and Contractors				, , , , , , , , , , , , , , , , , , , ,
•		*		11		
				ATTO	***************************************	-
	CLASS	PREMIUM	PREMISES -	PRODUCTS -	PREMISES -	PREMIUM PRODUCTS
	CODE	BASIS	OPERATIONS	COMPLETED	OPERATIONS	COMPLETED
CLASSIFICATION				OPERATIONS		OPERATION
		a) Area	a) per 1000			
		c) Total Cost	c) per \$1000		1	
		p) Payroll	p) per \$1000]
		s) Gross Sales u) Units	s) per \$1000 u) per Unit	or sales	Ì	
	1	t) Acres	t) per Acre		}	ļ :
+			, , , , , , , ,	-		
				•		
				}		
VACANT LAND - OTHER THAN NOT-	49451#	12.00 (t)	3.318	INCL.	40.00	INCL
FOR-PROFIT				j .		
Loc BA: Rivers End, Smalleys	[İ		
Dam Road, Newark, New		·				
Castle Co, DE				1		1
			-		,	
						l ·
						ľ
HODEL HOMES	46362	1.00 ()		-INCL	06.00	THE
NODEZ NOMES	49.202.	1.00-(u)	. 93.039	The state of the s	96.00	INCL
oc 9A: Wellington Woods, Off		į		[
Rt 40. Bear. New	1			1	l	'
Castle Co. DE				1		
	1					
ACANT LAND - OTHER THAN NOT-	49451#	40.00 (t)	3.318	INCL.	133.00	INCL.
OR-PROFIT		-				ı
oc 98: See Loc 9A		•				
		. 1				i
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	} }	}				
inimum Premium \$ 208.00 /	ļ	·	Total Adver	co Province	CA	Cont
inimum Premium \$ 208.00 / ocation Of All Premises You Own		······································		ce Premium \$ ess)	Cont	CONT
ee Above Schedule	nene di co		. govern seg FRAGES	· <i>;</i>		
our Interest In These Premises:	[X] Owner	[] General Lessee	[] Tenant	[:]		
art You Occupy: Portion	· · · · · · · · · · · · · · · · · · ·					
·	This Sci	hedule lists all you	r premises. ope	erations and oth	er exposures, as	they
	exist a	s of the Coverage Ef	fective Date.			

Selective	This schedule lists classifications, exposures, races and premiums for those coverage larts indicated below: [X] Commercial General Liability								
	7		<u> </u>	ATES	ADVANCE PREMEUM				
	CLASS	PREMIUM	PREMISES -	PRODUCTS -	PREMISES -	PRODUCTS -			
	CODE	BASIS	OPERATIONS	COMPLETED	OPERATIONS	COMPLETED			
CLASSIFICATION	ſ			OPERATIONS		OPERATIONS			
		a) Area	a) per 1000 s	quare feet					
ł	1	c) Total Cost	c) per \$1000						
ļ	1	p) Payroll	p) per \$1000						
·	1	s) Gross Sales	s) per \$1000	•					
i .	1	u) Units	u) per Unit						
[t) Acres	t) per Acre	}					
·	.]	t c) heres	ty per nere	·					
	ł			j	1				
	l			1					
CONTRACTOR OF THE PART HOT	404514	10.00.41	2 210	1 ,,,,,	62.00	tue			
VACANT LAND - OTHER THAN NOT- FOR-PROFIT	49451#	19.00 (t)	3.318	INCL.	63.00	INCL.			
		}	1	1					
Loc 9C: See Loc 9A	.	{		!					
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VACANT LAND - OTHER THAN NOT-	49451#	111.00 (t)	3.318	INCL.	368.00	INCL.			
FOR-PROFIT						4			
				.					
Loc 10A: Summit Bridge Road,				1					
West, Middletown,			· .						
New Castle Co, DE					`				
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VACANT LAND - OTHER THAN NOT~	49451#	16.00 (t)	3.318	INCL.	53.00	INCL.			
COD DOCKT	424274	10.00 (1)	3.320	inc.		•			
FUN-FRUFA1 SULTA					}				
ine 118: Commit Duiden Dand	}			j.	·]				
Loc 11A: Summit Bridge Road,				1					
			1	. 1	1				
New Castle Co. DE		•							
				1					
		·							
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	ليحصيا	7				Cont			
Minimum Premium \$ 208.00 /		2.00		ce Premium \$	Cont	Conc			
Location Of All Premises You Own, See Above Schedule	, Rent or C	ontrol: (Enter Same	if same as Addre	ess)					
			·	·					
Your Interest In These Premises:	[X] Owner	[] General Lessee	[] Tenant	[]					
Part You Occupy: Portion			·						
		chedule lists all you		erations and other	er exposures, as	they			
	exist a	is of the Coverage El	ffective Date.						

% }

Case 1:05-cv-00309-	KAJ Do	cument 16-6 chedule lists classi	Filed 11/04/	2005 Pag	e 27 of 27	10\$8 COVONS
Selective) parts	indicated below:	t teat tons, expo)		iose coverage
	[X] Commercial General Liability [] Products/Completed Operations					
	1 0w	ners and Contractors	Protective Liab	oility [Liqu 	or Liability	
				ATES		PREMIUM
	CLASS	PREMIUM BASIS	PREMISES - OPERATIONS	PRODUCTS - COMPLETED	PREMISES - OPERATIONS	PRODUCTS COMPLETED
CLASSIFICATION	1 000		0.510.17.0113	OPERATIONS	UI ENATIONS	OPERATION
		a) Area	a) per 1000 s			
		c) Total Cost	c) per \$1000 of Cost p) per \$1000 of Payroll s) per \$1000 of Sales		Ì	1
		p) Payroll s) Gross Sales			ļ	
		u) Units	u) per Unit			1
		t) Acres	t) per Acre			
REAL ESTATE DEVELOPMENT	47051	19.00 (t)	22,093	INCL.	420.00	INCL
PROPERTY						
		.				· ·
Loc 12A: Rt 1 Rehoboth Shore Estates, Rehoboth,					·	
Sussex Co, DE					·	
						j
BUILDINGS OR PREMISES - BANK	61217	4,000.00 (a)	26.876	INCL.	108.00	INCL
OR OFFICE - MERCANTILE OR						
MANUFACTURING - MAINTAINED BY THE INSURED (LESSOR'S RISK						}
ONLY)- OTHER THAN NOT-FOR-	1		,			
PROFIT						
Loc 128: 867 Airport Doad			·		•	
Loc 13A: 467 Airport Road, New Castle Co. DE						
		· .				j
OWELLINGS - ONE-FAMILY (LESSOR'S RISK ONLY)	63010	1.00 (u)	25.889	INCL.	26.00	INCL
ALLOSON S RISK ONLY						
Loc 14A: 800 Ocean Drive,						
Bethany, Sussex Co,	. [·				{ }
DE			į			}
			1	·		
		·	j			
Minimum Dromium # 200 00	1	, 00	Yakal Adve-	n Dunniu	Conh	Cont
Minimum Premium \$ 208.00 / Location Of All Premises You Dum		ontrol: (Enter Same i	Yotal Advance if same as Addre		Cont	
See Above Schedule	., ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,		
Your Interest In These Premises:	[X] Owner	[] General Lessee	[] Tenant	[]		
Part You Occupy: Portion						
	This Schedule lists all your premises, operations and other exposures, as they					